

STATEMENT OF ECONOMIC INTERESTS

Date Received  
Official Use Only

COVER PAGE

MAR 7 2011

Please type or print in ink.

2011 MAR -1 PM 5:06

NAME OF FILER

(LAST)

(FIRST)

(MIDDLE)

PAYLEY

FRANCES (FRAN)

J.

1. Office, Agency, or Court

Agency Name

Calif. State Senate

Division, Board, Department, District, if applicable

23rd District

Your Position

State Senator

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☐ County of \_\_\_\_\_

☐ City of \_\_\_\_\_

☐ Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is \_\_\_\_\_, through December 31, 2010.

☐ Leaving Office: Date Left \_\_\_\_\_  
(Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ The period covered is \_\_\_\_\_, through the date of leaving office.

☐ Assuming Office: Date \_\_\_\_\_

☐ Candidate: Election Year \_\_\_\_\_

Office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☐ Schedule B - Real Property - schedule attached

► Total number of pages including this cover page: 6

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

5.

I have used all reasonable diligence in preparing this statement. I have reviewed this herein and in any attached schedules is true and complete. I acknowledge this is a

I certify under penalty of perjury under the laws of the State of California that

Date Signed

Jan. 23, 2011  
(month, day, year)

Signature

(File the originally signed statement with your filing official.)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION  
 A PUBLIC DOCUMENT

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**

 Date Received \_\_\_\_\_  
 Official Use Only

Please type or print in ink.

 NAME OF FILER (LAST) (FIRST) (MIDDLE)  
PAULEY FRANCES (FRAN) J
**1. Office, Agency, or Court**

Agency Name

Calif. State Senate

Division, Board, Department, District, if applicable

23rd District

Your Position

State Senator

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**☒ State☐ Judge (Statewide Jurisdiction)☐ Multi-County \_\_\_\_\_☐ County of \_\_\_\_\_☐ City of \_\_\_\_\_☐ Other \_\_\_\_\_**3. Type of Statement (Check at least one box)**☒ Annual: The period covered is January 1, 2010, through December 31, 2010.☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)-or-  
The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2010.☐ The period covered is January 1, 2010, through the date of leaving office.☐ Assuming Office: Date \_\_\_\_/\_\_\_\_/\_\_\_\_☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.☐ Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 6☒ Schedule A-1 - Investments - schedule attached☐ Schedule C - Income, Loans, & Business Positions - schedule attached☒ Schedule A-2 - Investments - schedule attached☒ Schedule D - Income - Gifts - schedule attached☐ Schedule B - Real Property - schedule attached☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule**5. Verification**
 MAILING ADDRESS STREET CITY STATE ZIP CODE  
 (Business or Agency Address Recommended - Public Document)

(d)(5)

DAYTIME TELEPHONE NUMBER

(d)(5)

E-MAIL ADDRESS

(d)(5)

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

 Date Signed Jan. 23, 2011  
 (month, day, year)

 Signature (d)(5)  
 (File the originally signed statement with your filing officer.)

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

F Pavley

NAME OF BUSINESS ENTITY  
Daimler Chrysler

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
car manufacturer

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/10      \_\_\_\_/\_\_\_\_/10  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
Cisco System INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
networking

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/10      \_\_\_\_/\_\_\_\_/10  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
Amgen

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Biotech company

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/10      \_\_\_\_/\_\_\_\_/10  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
Coca Cola, INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
beverage products

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/10      \_\_\_\_/\_\_\_\_/10  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
AOL TIME WARNER

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Interactive Tech Services

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/10      \_\_\_\_/\_\_\_\_/10  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
Disney, Walt Holding Co

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
entertainment

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/10      \_\_\_\_/\_\_\_\_/10  
 ACQUIRED      DISPOSED

Comments:

**SCHEDULE A-1**  
**Investments**

Stocks, Bonds, and Other Interests  
(Ownership Interest is Less Than 10%)  
Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

F Pavley

<p>▶ NAME OF BUSINESS ENTITY <u>Home Depot, INC</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Home Improvement Center</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499                          <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>Merck &amp; Co</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>pharmaceutical</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499                          <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <u>Intel Corporation</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Semi Conductor Chipmaker</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499                          <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>Nike, INC. Class B</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>athletic footwear/apparel</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499                          <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <u>Microsoft Corp</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>software</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499                          <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>Charles Schwab Corp.</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Financial Services</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499                          <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>

Comments: \_\_\_\_\_

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
Name P. PAVLEY

**1. BUSINESS ENTITY OR TRUST**  
Name PAVLEY FARM  
Address (Business Address Acceptable) 416 Carlton Rd. Watsonville, CA 95076  
Check one ☒ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
Family Farm

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

ACQUIRED 10 DISPOSED 10

NATURE OF INVESTMENT  
☐ Sole Proprietorship ☒ Partnership ☐ Other Sister

YOUR BUSINESS POSITION NONE

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☐ \$0 - \$499 ☒ \$10,001 - \$100,000  
☐ \$500 - \$1,000 ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
☐ INVESTMENT ☒ REAL PROPERTY

416 Carlton Rd. Watsonville, CA 95076

Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property 95076

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☒ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

ACQUIRED 10 DISPOSED 10

NATURE OF INTEREST  
☒ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership  
☐ Leasehold Yrs. remaining ☐ Other Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

**1. BUSINESS ENTITY OR TRUST**  
Name  
Address (Business Address Acceptable)  
Check one ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

ACQUIRED 10 DISPOSED 10

NATURE OF INVESTMENT  
☐ Sole Proprietorship ☐ Partnership ☐ Other

YOUR BUSINESS POSITION

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☐ \$0 - \$499 ☐ \$10,001 - \$100,000  
☐ \$500 - \$1,000 ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

ACQUIRED 10 DISPOSED 10

NATURE OF INTEREST  
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership  
☐ Leasehold Yrs. remaining ☐ Other Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

Comments: There are no single sources of 10,000 or more

# SCHEDULE D Income – Gifts

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
Fran Pawley

NAME OF SOURCE  
CA Professional Fire Fighters  
ADDRESS (Business Address Acceptable) Sacramento  
1788 Creekside Oaks Dr 95833  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/11/10	\$ 68.97	dinner & cocktails
/ /	\$	
/ /	\$	

NAME OF SOURCE  
CA Democratic Party  
ADDRESS (Business Address Acceptable) 95811  
1401 21<sup>st</sup> St. Ste 200 Sacramento  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/12/10	\$ 110.78	caucus retreat
/ /	\$	
/ /	\$	

NAME OF SOURCE  
CA Foundation on the Environment  
ADDRESS (Business Address Acceptable) 94133  
Pier 35, Ste 202 San Francisco  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10/3/10	\$ 459.89	lodging & meals
/ /	\$	
/ /	\$	

NAME OF SOURCE  
Pepperdine University  
ADDRESS (Business Address Acceptable) 90263  
24255 Pacific Coast Hwy Malibu  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10/22/10	\$ 184.29	framed photos
/ /	\$	
/ /	\$	

NAME OF SOURCE  
CA Medical Association  
ADDRESS (Business Address Acceptable) 95814  
1201 J Street Ste 200 Sacramento  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/2/10	\$ 25.80	reception food & beverage
4/26/10	\$ 37.40	reception food & beverage
/ /	\$	

NAME OF SOURCE  
National Caucus of Environmental Legislators  
ADDRESS (Business Address Acceptable) 20036  
1920 L Street, NW Ste 800 Washington  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7/20/10	\$ 151.85	meal & transportation
/ /	\$	
/ /	\$	

Comments:

**SCHEDULE D**  
**Income – Gifts**

Name

F. Pavley

► NAME OF SOURCE Argentina  
Fundacion Nueva Generacion  
ADDRESS (Business Address Acceptable)  
Bv. Orono 1231, Planta Alta, Rosario  
BUSINESS ACTIVITY, IF ANY, OF SOURCE S 2000 KDB  
non-profit organization Argentina

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11/12/2010</u>	<u>\$ 1397.00</u>	<u>Accommodations, meals, &amp; ground transportation</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE  
National Parks Conservation Assn  
ADDRESS (Business Address Acceptable)  
1300 19th St. NW Ste 300 Washington  
BUSINESS ACTIVITY, IF ANY, OF SOURCE B.C.  
non profit organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9/27/2010</u>	<u>\$ 420</u>	<u>airfare</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE  
\_\_\_\_\_  
ADDRESS (Business Address Acceptable)  
\_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE  
Ministry of Foreign Affairs of Chile  
ADDRESS (Business Address Acceptable)  
Teatinos 180, Santiago Chile  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11/18/2010</u>	<u>\$ 500</u>	<u>ground transportation, two lunches &amp; commemorative gift</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE  
\_\_\_\_\_  
ADDRESS (Business Address Acceptable)  
\_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE  
\_\_\_\_\_  
ADDRESS (Business Address Acceptable)  
\_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

Comments: \_\_\_\_\_



# SCHEDULE D

Income - Gifts

2011 MAR 10 PM 1:37

CALIFORNIA FORM 700  
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

MAR 9 2011

NAME OF SOURCE  
Monterey Bay Aquarium Foundation  
ADDRESS (Business Address Acceptable)  
886 Cannery Row Monterey, CA 93940  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
non- profit

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 06 / 10	\$ 53.79	food & beverage
___/___/___	\$	
___/___/___	\$	

NAME OF SOURCE  
ADDRESS (Business Address Acceptable)  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$	
___/___/___	\$	
___/___/___	\$	

NAME OF SOURCE  
ADDRESS (Business Address Acceptable)  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$	
___/___/___	\$	
___/___/___	\$	

NAME OF SOURCE  
ADDRESS (Business Address Acceptable)  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$	
___/___/___	\$	
___/___/___	\$	

NAME OF SOURCE  
ADDRESS (Business Address Acceptable)  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$	
___/___/___	\$	
___/___/___	\$	

## Verification

Print Name Fran Pavley  
Office, Agency or Court Senate  
Statement Type ☐ 2010/2011 Annual ☐ Assuming ☐ Leaving  
☒ 10 Annual ☐ Candidate  
(yr)  
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.  
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.  
Date Signed March 7, 2011  
(month, day, year)

Signature

(d)(5)

Comments: